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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 ROC920010125US1 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) July 11, 2001 Filed Application Number 09/903,350 ENHANCED ELECTRONIC PROGRAM GUIDE For Ngoc K. Vu Examiner 2623 Art Unit This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): 8mail Entity Fee <u>Fee</u> \$ 120.00 \$60 \$120 One month (37 CFR 1.17(a)(1)) \$225 \$450 ☐ Two months (37 CFR 1.17(a)(2)) \$510 \$1020 Three months (37 CFR 1.17(a)(3)) \$795 \$1590 Four months (37 CFR 1.17(a)(4)) \$1080 Five months (37 CFR 1.17(a)(5)) \$2160 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 Is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 09-0465 / ROC920010125US1. I have enclosed a duplicate copy of this sheet. applicant/inventor. I am the ☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. Reg. No. January 9, 2007 /Gero G. McClellan, Reg. No. 44,227/ Date Signature 713-623-4844 Gero G. McClellan, Reg. No. 44,227 Telephone Number Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if mare than one signature is required, see below. Total of 1 forms are submitted.

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